Recipient Committee Campaign Statement Cover Page			Type or print in ink.			Stamp ERK	CALIFORNIA 460
(Government Code Sections 84200-84216 1000195 SEE INSTRUCTIONS ON REVERSE	5)	from through	02/17/2013 gh03/16/2013	Date of election if applicable: (Month, Day, Year)	JUL 22	rn 3.39	Page _ 1 _ of _ 10 For Official Use Only
Type of Recipient Committee     Officeholder, Candidate Controlled (	Committee [	Primarily Committe Contro Spons (Also Comple	Formed Ballot Measure e blled sored te Part 6) Formed Candidate/ der Committee	2. Type of Statement:  X Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T X Amendment (Explain b Adjusted from Previo	ermination)	Spe	arterly Statement cial Odd-Year Report oplemental Preelection tement - Attach Form 495
3. Committee Information  COMMITTEE NAME (OR CANDIDATE'S NAM Joylene Wagner for School Bo		I.D. NUMBE 1355274 EE)		Treasurer(s)  NAME OF TREASURER  Stacey Brenner  MAILING ADDRESS  4766 Park Granada 101	L		
STREET ADDRESS (NO P.O. BOX) 1250 Marion Dr. CITY	STATE ZIF	CODE	AREA CODE/PHONE	CITY Calabasas NAME OF ASSISTANT TREASU			CODE AREA CODE/PHONE 302 (818) 970-5710
Glendale MAILING ADDRESS (IF DIFFERENT) NO. A	CA 9	1205	(818) 480-1503	MAILING ADDRESS			
CITY	STATE ZIF	CODE	AREA CODE/PHONE	CITY		STATE ZIP (	CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS			·	OPTIONAL: FAX / E-MAIL ADDR	RESS		
4. Verification I have used all reasonable diligence in prounder penalty of perjury under the laws of	f the State of Calif	The second second second	By Stacey Breed Brown By Joylene Was Signature of Co	nner (Faur) Signature of Treasurer or Assistant	Treasurer  U A A A A Poponent or Responsit	ole Officer of Sponsor	ules is true and complete. I certify
Executed on			Ву	Signature of Controlling Officeholder, Candidate, S	tate Measure Propor	ent	

**COVER PAGE** 

NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLO	TMEASURE			
Joylene Wagner			*				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	TRICT NUMBER IF APPLI	CABLE)	BALLOT NO. OR	ETTER JURIS	DICTION		SUPPORT OPPOSE
Board of Education City of Glendale							UPPUSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY ST.	ATE ZIP	Identify the o	ontrolling officeholde	r candidate or st	ato moscuro r	rononont if an
250 Marion Dr.	Glendale C	CA 91205	No.	NAME OF THE PARTY	2000 Carrier a 200 com a 100 Carrier a 100 C	late measure p	roponent, it at
	1000		NAME OF OFFIC	EHOLDER, CANDIDATE,	UR PROPONENT		
Related Committees Not Included in this so included in this statement that are controlled by you	ou or are primarily for	Control State of the Control of the	OFFICE SOUGH	OR HELD		DISTRICT NO. I	FANY
contributions or make expenditures on behalf of your							
COMMITTEE NAME	I.D. NUMBER						
	1						
				ordinara singulari sa Africa	Month Mark Committee Commi	SWAN THE	
NAME OF TREASURER	CONTROLLED COM	MMITTEE?		ormed Candidate/			
NAME OF TREASURER	49 at 01 at	MMITTEE?	officeholder(s)	or candidate(s) for whi	ch this committee is	s primarily form	
	☐ YES ☐		officeholder(s)		ch this committee is		ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	D. BOX)		officeholder(s)  NAME OF OFFIC	or candidate(s) for whi	ch this committee is	s primarily form	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	D. BOX)	] NO	officeholder(s)  NAME OF OFFIC	or candidate(s) for whi	ch this committee is	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	D. BOX)	] NO	NAME OF OFFIC	or candidate(s) for whi EHOLDER OR CANDIDAT EHOLDER OR CANDIDAT	Ch this committee is  OFFICE SOU  OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE
	D. BOX)  P CODE AREA	] NO	NAME OF OFFIC	or candidate(s) for whi	Ch this committee is  OFFICE SOU  OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C.	D. BOX)  P CODE AREA  I.D. NUMBER  CONTROLLED COM	NO A CODE/PHONE	NAME OF OFFICE	or candidate(s) for whi EHOLDER OR CANDIDAT EHOLDER OR CANDIDAT	Ch this committee is  OFFICE SOU  OFFICE SOU  OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C.  CITY STATE ZI  COMMITTEE NAME  IAME OF TREASURER	D. BOX)  P CODE AREA  I.D. NUMBER  CONTROLLED CON  YES	NO A CODE/PHONE	NAME OF OFFICE	EHOLDER OR CANDIDATE  EHOLDER OR CANDIDATE  EHOLDER OR CANDIDATE  EHOLDER OR CANDIDATE	Ch this committee is  OFFICE SOU  OFFICE SOU  OFFICE SOU	GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.C.  CITY STATE ZI  COMMITTEE NAME	D. BOX)  P CODE AREA  I.D. NUMBER  CONTROLLED CON  YES	NO A CODE/PHONE	NAME OF OFFICE	EHOLDER OR CANDIDATE  EHOLDER OR CANDIDATE  EHOLDER OR CANDIDATE  EHOLDER OR CANDIDATE	Ch this committee is  OFFICE SOU  OFFICE SOU  OFFICE SOU	GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

## Campaign Disclosure Statement **Summary Page**

Type or print in ink. Amounts may be rounded

SUMMARY PAGE Statement covers period **CALIFORNIA FORM** 02/17/2013 from \_ 03/16/2013 Page \_\_\_3 \_\_\_ of \_\_\_10 \_\_\_ through \_ I.D. NUMBER

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1355274 Joylene Wagner for School Board 2013

college magnet for comor pour 2013						
Contributions Received		Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)		COLUMN B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summa Running in Both the S General Elections	
1. Monetary Contributions Schedule A, Line 3	\$	3,984.19	\$	5,407.19	1/1 through	h 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3		0.00		1,100.00	THE COMMENTS OF THE COMMENTS O	17 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	s	3,984.19	\$	6,507.19	20. Contributions Received \$	\$
4. Nonmonetary Contributions		0.00		308.90	21. Expenditures	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	s	3,984.19	\$	6,816.09	Made \$	<b></b> \$
Expenditures Made					Expenditure Limit Sun	mary for State
5. Payments Made Schedule E, Line 4	\$	1,263.03	\$	2,030.19	Candidates	
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative E	xpenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	1,263.03	\$	2,030.19	(If Subject to Volum	tary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)				1,687.19	Date of Election	Total to Date
10. Nonmonetary Adjustment				308.90	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADEAdd Lines 8 + 9 + 10	\$	2,125.22	\$	4,026.28		\$
Current Cash Statement						\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	1,755.84	То	calculate Column B, add		
13. Cash Receipts Column A, Line 3 above		3,984.19		ounts in Column A to the responding amounts		1166
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this section may be reported in Column B.	e different from amounts
15. Cash Payments Column A, Line 8 above		1,263.03		oort. Some amounts in lumn A may be negative		
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	4,477.00		ures that should be otracted from previous		
If this is a termination statement, Line 16 must be zero.			ре	riod amounts. If this is		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for car	this calendar year, only ry over the amounts		
Cash Equivalents and Outstanding Debts	85	Allea	fro an	m Lines 2, 7, and 9 (if y).		
18. Cash Equivalents See instructions on reverse						<u> </u>
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	2,787.19				FPPC Form 460 (January/0 66/ASK-FPPC (866/275-37)

Type or print in ink.
Amounts may be rounded

SCI	1EDI	II F	Δ

Monetary Contributions Received		to	whole dollars.	from02/17/2		FORM 460
SEE INSTRUCTION	ONS ON REVERSE			through _03/16/2	013	Page4 of10
NAME OF FILER						I.D. NUMBER
Joylene Wag	ner for School Board 2013					1355274
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE
02/21/2013	Ruth Charles 921 Kilmary Ln. Glendale, CA 91207	⊠IND □COM □OTH □PTY □SCC	Retired Retired	100.00	10	0.00
02/21/2013	Joann Merrick 328 Starlight Crest Dr. La Canada, CA 91011	IND  COM  OTH  PTY  SCC	Retired Retired	100.00	10	0.00
02/26/2013	Mary Boger 1601 Capistrano Ave. Glendale, CA 91208	⊠IND □COM □OTH □PTY □SCC	School Board Member Glendale Unified School District	250.00	25	0.00
02/26/2013	Rosa Frommer 1762 Allen Ave Glendale, CA 91201	IND COM OTH PTY SCC	Retired Retired	100.00	10	0.00
02/26/2013	Ann Marie Jones 1212 Tyler St. Glendale, CA 91205	☑IND □COM □OTH □PTY □SCC	Retired Retired	100.00	10	0.00
			SUBTOTAL\$	650.00		
1. Amount re	A Summary ceived this period – itemized monetary contributions.  Il Schedule A subtotals.)		\$	1,900.00	IND In COM	Recipient Committee (other than PTY or SCC)
2. Amount re	ceived this period – unitemized monetary contributions	s of less than	\$100\$	2,084.19	PTY-F	Other (e.g., business entity) Political Party
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.	) <b>TOTAL \$</b>	3,984.19	SCC-S	Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

### Schedule A (Continuation Sheet) **Monetary Contributions Received**

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (C	ONT.)	i
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CALIFORNIA 460

Statement covers period

from .

02/17/2013

				through03/16/	/2013	Page	5 of 10
NAME OF FILER						I.D. NUMB	SER
Joylene Wagne	er for School Board 2013					1355274	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)
02/26/2013	Rhea Laird 1481 E. Glenoaks Blvd. Glendale, CA 91206	XIND COM OTH PTY	Retired Retired	100.00	100	0.00	
02/26/2013	Manasserian Family Living Trust- Elizabeth A Manasserian TTE 614 Glenandale Terrace Glendale, CA 91206	□IND □COM ☑OTH □PTY □SCC		100.00	100	0.00	
02/26/2013	TJ Kyle and SE McCreary Family Revocable Living Trust Dated March 16, 2007 5810 Ocean View Blvd. La Canada Flintridge, CA 91011	□IND □COM ☑OTH □PTY □SCC		100.00	100	0.00	
03/04/2013	Phyllis Campbell 1314 Norton Ave. Glendale, CA 91202	☑IND □COM □OTH □PTY □SCC	Retired Retired	100.00	100	0.00	
03/04/2013	Jeff Junge 2926 Henrietta Ave. La Crescenta, CA 91214	⊠IND □COM □OTH □PTY □SCC	Retired Retired	100.00	100	0.00	
			SUBTOTALS	\$ 500.00			

\*Contributor Codes

IND-Individual

COM - Recipient Committee

(other than PTY or SCC) OTH – Other (e.g., business entity)

PTY-Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.

SCHEDUL	EA (CONT.)
CALIFORNIA	460

vionetary Contributions Received	to whole dollars.	Statement covers period	CALIFORNIA 160
	to whole donars.	from02/17/2013	FORM 400
6		through03/16/2013	Page6 of10
AME OF FILER			I.D. NUMBER
oylene Wagner for School Board 2013			1355274

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/04/2013	Jo Van Amburg 3201 San Gabriel Ave. Glendale, CA 91208	XIND COM OTH PTY	Librarian Glendale Unified School District	100,00	100.00	
03/14/2013	Michael Escalante 13775 S. Ramona Ave. Hawthorne, CA 90250	XIND COM OTH PTY	Professor USC	200.00	200.00	
03/14/2013	Brian Marks 1501 Oxford St. Berkeley, CA 94709	XIND COM OTH PTY	Retired Retired	100.00	100.00	
03/14/2013	Shiela Shima 1300 S. Adams St Glendale, CA 91205	IND COM OTH PTY	Retired Retired	100.00	100.00	
03/14/2013	Robert Yousefian 2605 E. Glenoaks Blvd. Glendale, CA 91206	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	General Contractor Omni Craft	250.00	250.00	
			SUBTOTAL\$	750.00		

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

S	ch	ed	ule	B-	- Part	1
ĺ	02	ne	Por	rio:	rad	

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

Type or print in ink.
Amounts may be rounded

SC	HEDU	IF	B-	PA	RT	1

Schedule B – Part 1 Loans Received	Amo	ounts may be ro to whole dollar		3	Statement cov	rers period	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE	6				through03/1	6/2013	Page7	of10	
NAME OF FILER							I.D. NUMBER		
Joylene Wagner for School Board 2013							1355274		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVEI THIS PERIOD	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Joylene Wagner 1250 Marion Dr. Glendale, CA 91205				PAID  \$ 0.00  FORGIVEN		RATE %	\$ 100.00	\$\frac{1,100.00}{PERELECTION**	
<sup>†</sup> ⊠ IND □ COM □ OTH □ PTY □ SCC		\$100.00	\$0.00	\$0.00	DATE DUE	\$0.00	DATE INCURRED	\$	
Joylene Wagner 1250 Marion Dr. Glendale, CA 91205				\$O.OC	\$_1,000.00	RATE %	\$_1,000.00	S_1,100.00 PERELECTION**	
<sup>†</sup> ⊠ IND □ COM □ OTH □ PTY □ SCC		s_1,000.00	\$	\$0.00	DATE DUE	\$0.00	01/24/2013 DATE INCURRED	\$	
				PAID  FORGIVEN	s	RATE	s	\$ PER ELECTION **	
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
		SUBTOTALS \$	0.00\$	<b>5</b> 0.0	00\$ 1,100.00	\$ 0.00			
Schedule B Summary						(Enter (e) on Schedule E, Line 3)			
Loans received this period (Total Column (b) plus unitemized loans				\$	0.00	_	Contributor Codes		
2. Loans paid or forgiven this period								ommittee PTY or SCC) business entity)	
Net change this period. (Subtract Line     Enter the net here and on the Summary	2 from Line 1.)			NET \$	0.00 May be a negative number)	so	CC – Small Contrit	outor Committee	

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

## Schedule E Payments Made

# Type or print in ink. Amounts may be rounded to whole dollars.

Stateme	ent covers period	CALIFORNIA 460
from	02/17/2013	FORM TOU
through _	03/16/2013	Page _ 8 _ of _ 10 _
		I.D. NUMBER
		1355274

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Joylene Wagner for School Board 2013

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

CODE O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
CNS	Campaign Consulting Fees	500.00
CMP		677.90
	CNS	CNS Campaign Consulting Fees

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL\$** 1,177.90

#### Schedule E Summary

Itemized payments made this period. (Include all Schedule E subtotals.)	\$	1,177.90
2. Unitemized payments made this period of under \$100	\$	85.13
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0.00
4 Total navments made this period (Add Lines 1.2 and 3 Enter here and on the Summary Page Column A Line 6.)	TOTAL \$	1,263.03

### Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.

Amounts may be rounded to whole dollars.

1355274

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Joylene Wagner for School Board 2013

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

RAD radio airtime and production costs campaign paraphernalia/misc. MBR member communications campaign consultants MTG meetings and appearances returned contributions office expenses contribution (explain nonmonetary)\* campaign workers' salaries petition circulating CVC civic donations t.v. or cable airtime and production costs FIL candidate filing/ballot fees phone banks TRC candidate travel, lodging, and meals polling and survey research staff/spouse travel, lodging, and meals FND fundraising events

IND independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services LEG legal defense PRO professional services (legal, accounting) TSF transfer between committees of the same candidate/sponsor VOT voter registration

T campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Emilie Pallos Graphic Design 658 Arden Ave. Glendale, CA 91202	LIT	0.00	708.50	0.00	708.50
Minuteman Press 446 South Central Ave Glendale, CA 91204	LIT	0.00	153.69	0.00	153.69
Joylene Wagner 1250 Marion Dr. Glendale, CA 91205	FIL Candidate Statement Deposit	800.00	0.00	0.00	800.00
* Payments that are contributions or independent expenditures must also be	SUBTOTALS	\$ 800.00\$	862.19\$	0.00\$	1,662.19

summarized on Schedule D.

SUBTOTALS \$ 800.00\$ 862.19\$ 0.00\$ 1,662.1

#### Schedule F Summary

Schedule F	
(Continuation She	et)
<b>Accrued Expenses</b>	(Unpaid Bills)

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULEF	(CONT.)
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Stater	nent covers period	CALIFORNIA 160					
from	02/17/2013	FORM +00					
through_	03/16/2013	Page 10 of 10					
		I.D. NUMBER					
		1355274					

Joylene Wagner for School Board 2013

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Joylene Wagner 1250 Marion Dr. Glendale, CA 91205	L Candidate Filing	25,00	0.00	0.00	25.00
11	SUBTOTALS S	25.00\$	0.00\$	0.00\$	25.00